FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

PAIGH DISCLOSURE BY
2010 JUL 16 PM 4: 33

	1000			
COMMITTEE NAME (Must be same as on Statement of Organi	ization)			
PRAIRIE MEADOWS YES!		1 [FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: 1 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) (4) County Central Committee (5) County Candidate (6) City Candidate (8) Subdivision Candidate (8) County PAC (9) City PAC (10) School Bo 11) Local Ballot Issue	State PAC (3) State Party	3 1	DR-2 Rev. 12/2009)	DISCLOSURE REPORT
CANDIDATE COMMITTEES ONLY:		≓ ;	ogged in S	WI 2 4
Candidate Name	Political Party (if applicable)	s	canned	
Office Sought	District (if Senate or House)		udited	
Late reports are subject to possible civil and criminal penalties. Pursu candidate's committee, and the chairperson, for any other type of cor	nant to lowa Code sections 688.324 nmittee, is the individual responsible	(7) and 68 o for filing (A.401(3), the can timely and accurat	didate, for a se reports.
Do Jaminis Treasurer	515-270-8886		7 11 10	
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		7-/6-/0 DATE SI	SNED
I AM FILING A JULY 19	REPORT FOR (1) ELECTION	/(<u>2)N</u> ON-	ELECTION YEA	R.
(report date)	Indicate by	# [
CHECK IF AMENDMENT TO REPORT DATED		Local Con	mittees, enter Date	of Election
Check if this is final (termination) report and attach Notice of I (You must continue to file reports until a DR-3 is filed.)	Dissolution Form DR-3.	11-2-201 County & I		
STATEMENT OF CASH ON HAND				
CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the car of the last reporting period or must be zero if this is first	sh on hand at the end	\$	0.00	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Schedule	A) (*also see in-kind below)	14 ******	36,000.00	
Schedule F: Loans Received total (Attach Schedule F)			0.00	
Schedule H: Total Sales of Campaign Property (Attach			0.00	
(Schedule Happlies to Candidates' Commit	tees Only)			
	SUB-TOTAL	\$	36,000.00	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD				
Schedule B: Expenditures total (Attach Schedule B) (**	also see debts and loans below).	********	153.67	
Schedule F: Loan Repayments total (Attach Schedule	F)		0.00	
CASH ON HAND at the end of this reporting period (if final report	t balance must be zero)	\$	35,846.33	
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	0.00	
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedul		-	0.00	
OUTSTANDING LOANS (From Schedule F - Attach Schedule	•	•	0.00	
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES✓_ N	10
CANDIDATE COMMITTEES ONLY:				
<u>CANDIDATE COMMITTEES ONLY:</u> VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach	Schedule H)	s	0.00	

For Instructions, See Back of Form	Steren war	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	Jessen de la company de la com	A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) PRAIRIE MEADOWS YES!		. —	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if epplicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
5-29-10	ID# CK#	HOLMES MURPHY AND ASSOCIATES P O BOX 9207 DES MOINES, IOWA 50306		\$10000.00	Brooka
5-29-10	ID# CK#	DONALD C. TIMMINS 8409 NE 54TH AVE ALTOONA. IOWA 50009		500.00	
5-29-10	ID# CK#	ED SKINNER P O BOX 367 ALTOONA, IOWA 50009		500.00	
6-9-10	ID# CK#	JAMES S. COWNIE 141 37TH ST. DES MOINES, IOWA 50312		10000.00	
6-18-10	CK#	RUAN, INC. P O BOX 855 DES MOINES, IOWA 50306		5000.00	
6-18-10	ID#	WILLIAM C. KNAPP 4949 WESTOWN PARKWAY, STE. 200 WEST DES MOINES, IOWA 50266		10000,00	
	ID# CK#				
	ID# CK#				
`	ID#				
) 	ID#				
		TOTAL CHILD	SUB-TOTAL se of this schedule)	\$ 36000.00	
		i A i VE (ii taət bal	io oi ana acitadale)	e 36000.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

s 36000.00

FOR INSTRUCTIONS, SEE BACK OF FORM

WE THE STREET STREET, STREET
A Company of the second of the second

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES			
CHECK THIS BOX IF AMENDING FORM				

COMMITTEE NAME (Must be same as on Statement of Organization)
PRAIRIE MEADOWS YES!

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
6-4-10	ID# CK#	LEGACY BANK ALTOONA, IOWA 50009	PRINT CHECKS	\$ 7.95
6-28-10	ID# CK# 1000	JULIE STEWART 211 5TH ST. NW ALTOONA, IOWA 50009	REIMBURSE FOR LUNCH FOR FINANCE COMMITTEE MEMBERS	145.72
	ID# CK#			
	ID#			
	CK#			
	CK#			
	ID# CK#			
	ID# CK#			
	ID#			
	CK#		SHE TOTA	L \$ 153.67
			30B-101A	- ■ Ψ 153.67

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-relaing, politing, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A.402(3)(i).)

Page	1	of 1	

\$ 153.67

TOTAL (if last page of this schedule)